File the original with:

PAGE 02/02

7 Z 2014-05-29 14;60:13 (GMT) 18007146080

CLASS C AMENDMENT FORM

18007148080 From: Joe Good

Mail or fax a copy to:

Clerk's Office Motor Carrier Matters P.O. Box 11649 Columbia, S.C. 29211 (802) 895 — 5100 FAX (803) 896-3199	Transportation Department 1401 Main Street, Suite 900 Columbia, S.C. 29201 (803) 737-0578 FAX (803) 737-0815
DATE:	TRANS DEPT 2010-144-T
I have the following Certificate:	2010
Class C Non-Emergency#	Class C Charter 846#
Please consider this as my request for the follow	ving amendment(s) to my Certificate:
Name Change	The state of the s
From: Islam TAXI AND Shuttle, LLC	DBA:(Current DBA if applicable)
(Current Name)	10 Part State Stat
TO: CRAZY CARL'S ISland TAXI-AND	(Current DBA if applicable)
Scope of Authority	(New DBA if applicable)
(Current Scope)	То:
granter the control of the control o	(New Scope)
Total.	To:
(Current Limit Number)	(New Limit Number)
Name & DBA if DBA is applicable)	822 O'sulbuan DR.
	(Street and/of Mailing Address)
MT. Pleasant, SC 29464 (City, State, Zip Code)	(Signature)
843-817-0445	A
(Telephone Number)	(Title) Owner, President, etc.

CERTIFIED TO BE A TRUE AND CORRECT COPY AR TAKEN FROM AND COMPARED WITH THE ORIGINAL ON FILE IN THIS OFFICE

STATE OF SOUTH CAROLINA SECRETARY OF STATE

JUN 1 1 2014 AMENDED ARTICLES OF ORGANIZATION

Limited Liability Company - Domestic Filing Fee - \$110.00

TYPE OR PRINT CLEARLY IN BLACK INK

Pursuant to S.C. Code of Law Amended Articles of Organizat	rs §33-44-204(a), the tion:	undersigned lim	ited liability company adopts the following	
1. The name of the limited liability company is Island Taxi & Shuttle LLC				
2. The date the articles of organization were filed is April 12, 2010				
additional sheets containing	a reference to the app	on. If the space propriate paragra	cts, of which all amended provisions may on this form is not sufficient, please attach oh on this form.	
Change of the LLC name from	om Island Taxi & Shut	tle to:		
Crazy Carl's Island Taxi & S	huttle LLC			
Signatura (Police and Pili		Joe Goo	d III	
Signature (Please see the Filing	Checklist below)		Print or Type Name	
Capacity/Position of Person Sign	ning (You must check on	e box.)	Date June 10, 2014	
☐ Manager • ☐ Membe	r 💆 Organize	er		
☐ Fiduciary ☐ Attorne	y-in-Fact	4 5		
	Filing	: Checklist		
	Secretary of State's Off turn Envelope ual has signed the form of Company forms filed w (1) manager of a man (2) member of a mem (3) person organizing	Tice (Please see S.C. Convith the Secretary mager-managed controller-managed controller-managed controller-managed controller-managed controller-managed controller-managed controller-managed company, if	of State must be signed in the name of the	
Return all documents to:	South Carolina Secreta Attn: Corporate Filing 1205 Pendleton Street S Columbia, SC 29201	ry of State's Offic s		
LLC Domestic Amended Articles of Organization	•	140625-0204 CRAZY CARL'S IS	FILED: 06/11/2014 LAND TAXI & SHUTTLE LLC Filing Fee: \$110.00 ORIG South Carolina Secretary of State	

South Carolina Secretary of State